

**TABLE 4**

**AVERAGE MEDI-CAL SPCP CONTRACT RATES  
AS OF DECEMBER 1, 2012**

<b>YEAR</b>	<b>1984</b>	<b>1987</b>	<b>1990</b>	<b>1993</b>	<b>1996</b>	<b>1999</b>	<b>2002</b>	<b>2005</b>	<b>2008</b>	<b>2011</b>	<b>2012</b>
<b>STATEWIDE</b>	\$513	\$544	\$651	\$780	\$836	\$871	\$991	\$1,108	\$1,363	\$1,478	\$1,490
<b>BY COMBINED STATISTICAL AREA (CSA)*</b>											
So. California	\$516	\$541	\$662	\$789	\$837	\$860	\$952	\$1,014	\$1,268	\$1,387	\$1,386
SF Bay Area	\$562	\$592	\$682	\$816	\$873	\$934	\$1,178	\$1,377	\$1,651	\$1,751	\$1,784
Other Areas	\$483	\$525	\$620	\$748	\$815	\$864	\$999	\$1,162	\$1,429	\$1,541	\$1,557
<b>BY NUMBER OF BEDS:</b>											
1 – 99	\$467	\$480	\$544	\$647	\$686	\$746	\$839	\$926	\$1,107	\$1,176	\$1,210
100 – 299	\$511	\$545	\$653	\$780	\$842	\$879	\$982	\$1,121	\$1,423	\$1,474	\$1,466
300 +	\$578	\$619	\$738	\$871	\$918	\$981	\$1,127	\$1,232	\$1,484	\$1,658	\$1,682
*CSA – Area designations of the U.S. Office of Management and Budget											
Southern California = Counties of Los Angeles, Orange, Riverside, San Bernardino and Ventura											
San Francisco Bay Area = Counties of Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano and Sonoma											
Other Areas = All other counties or CSAs containing an insufficient number of hospitals to allow for meaningful comparisons.											

Sources: OSPCP Management Information System and Annual OSHPD Utilization Report of Hospitals (calendar year 2010).

## **AVERAGE PAYMENT RATE CHANGES**

Although the State continues to maintain contracts with 200 general acute care hospitals, as of December 1, 2012, only 179 of those contracts were for negotiated per diem rates. Twenty-one public hospitals are reimbursed on a certified public expenditures basis. The average per-day reimbursement received by the 179 general acute care hospitals with Medi-Cal SPCP per diem contracts on December 1, 2012 was \$1,490, up from \$1,478 on December 1, 2011. Amounts paid to the 21 public hospitals now reimbursed on a CPE basis were not included in the average per diem calculation. The overall increase in the statewide average resulted from the combination of the following effects during the twelve-month period:

- 5 SPCP contract hospitals received an increase in rates through the negotiation process; there were 37 such increases in the previous year;

- 1 general acute care hospital began contracting for the first time;
- 3 general acute care hospitals began recontracting with the SPCP;

Table 4 displays average contract rates by region and hospital size for calendar years 1984 through 2012. These numbers represent the average rate paid under SPCP contracts as of December 1 for each year reported.

In calculating the average area rate for Medi-Cal contracts, there are many factors that contribute to the published area rate differentials. These factors include, but are not limited to, the number of hospitals in the area, the population each hospital serves, the services each hospital provides, the costs of these services, and bed availability.